

Town of Bridgeville 2019 Business License Application

Annual License fee is \$100.00
Expires 12/31/2019

Please include:							
□ a copy of your 2019 State of Delaware Business License							
 □ a copy of your Certificate of Liability Insurance (fax: 302-337-7817; email: awalls@townofbridgevillede.us) □ the annual fee made payable to: The Town of Bridgeville 							
						101 N. Main Street	
						Bridgeville, DE 19933	
Trade Name of Business:							
Business Address:							
Owner or Applicants Telephone Number (s):							
(Cell, Home, Work)							
Email Address:							
Full Description of the Nature of the Business:							
Business within Town Limits? ☐ Yes ☐ No							
*The applicant has complied and will comply with all laws and ordinances of th	e Town of Bridgeville and						
all employees employed by the applicant to do work in the Town of							
Bridgeville are legal residents of the United States of America.							
* Documents verifying the status of any or all employees shall be furnished to	the Code						
Enforcement Officer upon request.							
Applicant Signature:	Date:						
Witness Signature:	Date:						

BELOW FOR OFFICE USE ONLY

Finance Director or Town Clerks Approval (Financial Good Standing)						
Application Date:	Date Paid:	License #: <u>19-</u>	Check #	Cash: ☐ Debit ☐ Credit ☐		